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| Bill To: Business your chargingInv date: \_\_\_\_\_\_\_\_\_\_\_ |  |
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| --- | --- | --- | --- | --- | --- | --- |
| Date | Day | Time | Length  | Description | Unit price | Total |
|  (example)1/4/20 | Thur | 6-7pm | 1hour | **Yin class** | $60 |  |
| 5/4/20 | Fri | 7-830pm | 90min | Hatha class | $90 | $150 |

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| Invoice No:\_\_\_ |  |
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Please pay to the following account:

Bank: \_\_\_\_\_\_\_\_

Account name: \_\_\_\_\_\_\_\_

BSB: \_\_\_\_\_\_\_\_

Account number: \_\_\_\_\_\_\_\_

Thank you for having me as a instructor at \_\_\_\_\_\_\_\_